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CONFIRMATION NO. 7431

<b>SERIAL NUMBER</b> 10/799,209	<b>FILING OR 371(c) DATE</b> 03/12/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3761	<b>ATTORNEY DOCKET NO.</b> 158627-0003
<b>APPLICANTS</b> Abraham Ebbie Soroudi, Los Angeles, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/526,251 12/01/2003 <i>ma</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/02/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 23
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Farzad E. Amini Blakely Sokoloff Taylor & Zafman LLP 12400 Wilshire Boulevard, Seventh Floor Los Angeles, CA90025-1030				
<b>TITLE</b> Device and method for exothermic treatment of eyelid diseases				
<b>FILING FEE RECEIVED</b> 587	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	